

CONTRACT #4
RFS # 343.20-028

Department of Health

VENDOR:
Tennessee Opportunity
Programs, Inc. (TOPS)



RECEIVED

OCT 02 2006

FISCAL REVIEW

STATE OF TENNESSEE
DEPARTMENT OF HEALTH
ANDREW JOHNSON TOWER
710 JAMES ROBERTSON PARKWAY
NASHVILLE, TENNESSEE 37247

September 20, 2006

Commissioner David Goetz
Finance & Administration
Tennessee Tower

Dear Commissioner Goetz:

Submitted for your review and approval is a request to amend the fee for service contract FA-04-15894-02 with Tennessee Opportunity Programs, Inc. (TOPS). This contract is resultant from RFP 343.20-01 for the provision of personnel to conduct a monthly telephone survey for the Behavioral Risk Factor Survey System (BRFSS), a Centers for Disease Control and Prevention (CDC) program. The survey consists of questions regarding health related behaviors that could have an adverse impact on the population's health. The current contract stipulates that TOPS provides up to twenty telephone interviewers, and administrative and supervisory staff to schedule, monitor and train the interviewers.

In April 2006, the Department received another grant award from CDC for conducting a very similar survey pertaining to pregnancy, the Pregnancy Risk Assessment and Monitoring System (PRAMS). This is a first time award to Tennessee for the PRAMS program.

The Department has had a long standing relationship with TOPS conducting the BRFSS survey. The TOPS staff are well trained in how to conduct a survey that addresses sensitive personal health issues, and are familiar with the use of a CATI (Computer Assisted Telephone Interview) automated telephone interviewing system, thus reducing the amount of training time needed and performed by Department BRFSS staff if another vendor is utilized.

The hours of BRFSS and PRAMS interviewing are similar, evenings, mornings, and weekends. TOPS has a pool of twenty trained interviewers to cover the erratic schedule. The number of PRAMS surveys to conduct is extremely small, possibly 300, compared to over 3,000 for BRFSS. State PRAMS staff will be conducting interviews during normal business hours, reducing the number of interviews to be complete by TOPS staff. TOPS has a sufficient number of interviewers with supervision that can handle the anticipated small number of PRAMS surveys during evening hours and weekends.

There are a number of unknowns in starting up a new program. It would be in the best interest of the State to utilize the existing TOPS contract for the PRAMS interviewing because of their proven track record conducting the BRFSS survey.

Sincerely,

Kenneth S. Robinson, M.D.
Commissioner

REQUEST: NON-COMPETITIVE AMENDMENT

APPROVED

RECEIVED

OCT 02 2006

Commissioner of Finance & Administration

Date:

FISCAL REVIEW

EACH REQUEST ITEM BELOW MUST BE DETAILED OR ADDRESSED AS REQUIRED.

1) RFS #	343.20-028-04	
2) State Agency Name :	Department of Health	
EXISTING CONTRACT INFORMATION		
3) Service Caption :	Provision of personnel to conduct a monthly statewide telephone survey that will gather information for the Behavioral Risk Factor Surveillance Survey (BRFSS).	
4) Contractor :	Tennessee Opportunity Programs, Inc. (TOPS)	
5) Contract #	FA-04-15894-02	
6) Contract Start Date :	April 1, 2004	
7) <u>Current</u> Contract End Date IF <u>all</u> Options to Extend the Contract are Exercised :	March 31, 2009	
8) <u>Current</u> Total Maximum Cost IF <u>all</u> Options to Extend the Contract are Exercised :	Approximately \$585,000	
PROPOSED AMENDMENT INFORMATION		
9) <u>Proposed</u> Amendment #	03	
10) <u>Proposed</u> Amendment Effective Date : (attached explanation required if date is < 60 days after F&A receipt)	December 1, 2006	
11) <u>Proposed</u> Contract End Date IF <u>all</u> Options to Extend the Contract are Exercised :	March 31, 2009	
12) <u>Proposed</u> Total Maximum Cost IF <u>all</u> Options to Extend the Contract are Exercised :	Approximately \$615,000	
13) Approval Criteria : (select one)	<input checked="checked" type="checkbox"/> use of Non-Competitive Negotiation is in the best interest of the state <input type="checkbox"/> only one uniquely qualified service provider able to provide the service	
14) Description of the Proposed Amendment Effects & Any Additional Service :		
Add additional funding and language for more contractor personnel to conduct another behavioral risk type of survey particular to new mothers and their recent pregnancy.		
15) Explanation of Need for the Proposed Amendment :		

The Department has received a grant from the Centers for Disease Control and Prevention (CDC) to conduct an ongoing monthly survey of new mothers about their health related behaviors during their most recent pregnancy. The program is called Pregnancy Risk Assessment Monitoring System (PRAMS). This is a first time award to the Department for the PRAMS project. The PRAMS survey content serves the same purpose of the BRFSS survey, assessing the behaviors of the population surveyed to measure the impact of adverse health related behaviors and socio-economic factors. The exact amount of additional personnel hours is not known, but is anticipated to be small, approximately 1,000 hours annually. The contract as written is specific to BRFSS. This amendment would broaden the scope to allow for conducting the PRAMS survey and other health related telephone surveys as needed.

16) Name & Address of Contractor's Current Principal Owner(s) :
(not required if proposed contractor is a state education institution)

Thomas Barnes, 2803 Foster Avenue, Nashville, TN 37210

17) Documentation of Office for Information Resources Endorsement :
(required only if the subject service involves information technology)

select one:



Documentation Not Applicable to this Request



Documentation Attached to this Request

18) Documentation of Department of Personnel Endorsement :
(required only if the subject service involves training for state employees)

select one:



Documentation Not Applicable to this Request



Documentation Attached to this Request

19) Documentation of State Architect Endorsement :
(required only if the subject service involves construction or real property related services)

select one:



Documentation Not Applicable to this Request



Documentation Attached to this Request

20) Description of Procuring Agency Efforts to Identify Reasonable, Competitive, Procurement Alternatives :

Given the anticipated low volume of PRAMS telephone surveys and the need for extreme confidentiality of the personal health information that the survey collects, utilization of the existing contractor was a logical decision. TOPS provides supervision of their interviewers while surveys are being conducted including after hours and weekends. It would be more costly to bring in another contractor that would include the supervision for only one interviewer.

21) Justification for the Proposed Non-Competitive Amendment :

The PRAMS survey content serves the same purpose of the BRFSS survey, assessing the behaviors of the population surveyed to measure the impact of adverse health related behaviors and socio-economic factors. The contract as written is specific to BRFSS. This amendment would broaden the scope to allow for conducting the PRAMS survey and other health related telephone surveys as needed. The exact amount of additional personnel hours is not known, but is anticipated to be less than 1,000 hours annually, at a cost of approximately \$15,000 per year or less. Had the Department known that the PRAMS grant was to be awarded to Tennessee when the RFP for BRFSS telephone surveyors was developed, the scope would have been broader to encompass multiple health related surveys. TOPS has an excellent record for providing quality personnel to conduct sensitive personal health information telephone surveys in a professional and confidential manner utilizing a similar automated survey software system, thus reducing the amount of training needed. The existing BRFSS survey is conducted on site at the Department seven days a week, at random times of the day and evenings. Supervision of the surveyors is provided by TOPS. TOPS has a pool of twenty trained interviewers to cover the erratic schedule. The number of PRAMS surveys to conduct is extremely small, possibly 300. State PRAMS staff will be conducting interviews during normal business hours, reducing the number of interviews to be complete by TOPS staff during the evening and weekends. TOPS has a sufficient number of interviewers that can handle the anticipated small number of PRAMS surveys that could be scheduled at the same times as BRFSS survey in the evenings and weekends, as well as provide supervision.

REQUESTING AGENCY HEAD SIGNATURE & DATE :

(must be signed & dated by the ACTUAL procuring agency head as detailed on the Signature Certification on file with OCR— signature by an authorized signatory will be accepted only in documented exigent circumstances)



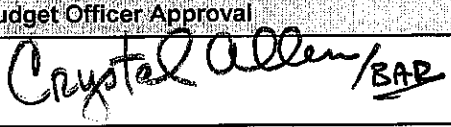
Agency Head Signature

9/27/06

Date

CONTRACT SUMMARY SHEET

021406

RFS #				Contract #			
343.20-028-04				FA-04-15894-03			
State Agency				State Agency Division			
Department of Health				Policy, Planning & Assessment			
Contractor Name				Contractor ID # (FEIN or SSN)			
Tennessee Opportunity Programs, Inc.				<input type="checkbox"/> C- or <input checked="" type="checkbox"/> X <input type="checkbox"/> V- 23-7292125-00			
Service Description							
For provision of a monthly statewide interviewing systems of residents of Tennessee - Amendment #3							
Contract BEGIN Date		Contract END Date		Subrecipient or Vendor?		CFDA #	
4/1/2004		3/31/2008		Vendor		93.945	
Mark Each TRUE Statement							
<input checked="" type="checkbox"/> Contractor is on STARS as required				<input checked="" type="checkbox"/> Contractor's Form W-9 is on file in Accounts as required			
Allotment Code	Cost Center	Object Code	Fund	Funding Grant Code	Funding Subgrant Code		
343.20	see attached	139	11	2T0			
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount		
2004		\$ 19,284.18			\$ 19,284.18		
2005		\$ 110,767.82			\$ 110,767.82		
2006		\$ 138,215.00		\$ 15,050.00	\$ 153,265.00		
2007		\$ 125,933.00		\$ 13,000.00	\$ 138,933.00		
2008		\$ 111,750.00		\$ 11,500.00	\$ 123,250.00		
					\$ -		
TOTAL:	\$ -	\$ 505,950.00	\$ -	\$ 39,550.00	\$ 545,500.00		
— COMPLETE FOR AMENDMENTS ONLY —				State Agency Fiscal Contact & Telephone #			
FY	Base Contract & Prior Amendments	THIS Amendment ONLY	Crystal Allen, 741-9419				
2004	\$ 19,284.18		State Agency Budget Officer Approval 				
2005	\$ 110,767.82						
2006	\$ 153,265.00						
2007	\$ 60,000.00	\$ 78,933.00					
2008		\$ 123,250.00	Funding Certification (certification, required by T.C.A., § 9-4-5113, that there is a balance in the appropriation from which the obligated expenditure is required to be paid that is not otherwise encumbered to pay obligations previously incurred)				
TOTAL:	\$ 343,317.00	\$ 202,183.00					
End Date	3/31/2006	3/31/2008					
Contractor Ownership (complete only for base contracts with contract # prefix: FA or GR)							
<input type="checkbox"/> African American	<input type="checkbox"/> Person w/ Disability	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Small Business	<input type="checkbox"/> NOT disadvantaged			
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input checked="" type="checkbox"/> OTHER minority/disadvantaged—Nonprofit				
Contractor Selection Method (complete for ALL base contracts—N/A to amendments or delegated authorities)							
<input type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation		<input type="checkbox"/> Alternative Competitive Method				
<input type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Negotiation w/ Government (eg, ID, GG, GU)		<input type="checkbox"/> Other				
Procurement Process Summary (complete for Alternative Method, Competitive Negotiation, Non-Competitive Negotiation, OR Other)							
RFP 343.20-001, term extension year four and adding additional language to allow for conducting additional survey pertaining to behaviors relating to adverse health outcomes. TOPS has proven their ability to conduct telephone surveys pertaining to confidential and sensitive private health information to ensure compliance to HIPAA. TOPS also is trained in the utilization of a CATI automated telephone interviewing system. Given the nature of the surveys, hours of operation, training requirements, and the low volume of the PRAMS survey to conduct, it was determined to be in the best interest of the State to utilize the existing contractor.							

FA-04-15894-03

2004

Allotment Code	Cost Center	Object Code	Fund	Grant Code	Subgrant Code	CFDA #	Amount
343.20	20	139	11	2T0		93.945	\$19,284.18
TOTAL							\$19,284.18

FA-04-15894-03

2005

[illegible]

TOTAL

CONTRACT SUMMARY SHEET SUPPLEMENT

Contract Number:		FA-04-15894-02					
Fiscal Year:		2008					
Allotment Code	Cost Center	Object Code	Fund	Grant Code	Subgrant Code	CFDA #	Amount
343.20	20	139	11	2T0		93.945	\$102,000.00
343.20	76	139	11	3E0		93.946	\$9,750.00
343.20	01	139	11				\$11,500.00
TOTAL							\$123,250.00

**AMENDMENT 03
TO FA-04-15894-00**

This Contract by and between the State of Tennessee, Department of Health, hereinafter referred to as the State, and Tennessee Opportunity Programs, Inc., hereinafter referred to as the Contractor, is hereby amended as follows:

1. Delete Section B.1 in its entirety and insert the following in its place:

B.1. Contract Term. This Contract shall be effective for the period commencing on April 1, 2004 and ending March 31, 2008. The State shall have no obligation for services rendered by the Contractor which are not performed within the specified period.

2. Delete Section C.1 in its entirety and insert the following in its place:

C.1. Maximum Liability. In no event shall the maximum liability of the State under this Contract exceed Five Hundred Forty-Five Thousand Five Hundred dollars (\$545,500). The Payment Rates in Section C.3 shall constitute the entire compensation due the Contractor for the Service and all of the Contractor's obligations hereunder regardless of the difficulty, materials or equipment required. The Payment Rates include, but are not limited to, all applicable taxes, fees, overheads, profit, and all other direct and indirect costs incurred or to be incurred by the Contractor.

The Contractor is not entitled to be paid the maximum liability for any period under the Contract or any extensions of the Contract for work not requested by the State. The maximum liability represents available funds for payment to the Contractor and does not guarantee payment of any such funds to the Contractor under this Contract unless the State requests work and the Contractor performs said work. In which case, the Contractor shall be paid in accordance with Payment Rates detailed in Section C.3. The State is under no obligation to request work from the Contractor in any specific dollar amounts or to request any work at all from the Contractor during any period of this Contract.

3. Delete the first paragraph on page one in its entirety and insert the following in its place:

This Contract, by and between the State of Tennessee, Department of Health, hereinafter referred to as the "State" and Tennessee Opportunity Programs, Inc. (TOPS), hereinafter referred to as the "Contractor," is for the provision of personnel to conduct monthly statewide telephone surveys that will gather information for the Behavioral Risk Factor Surveillance Survey (BRFSS), Pregnancy Risk Assessment and Monitoring Survey (PRAMS), and other health related surveys on an as needed basis as further defined in the "SCOPE OF SERVICES."

4. Delete Section A.1 in its entirety and insert the following in its place:

A.1. The Contractor shall:

- a. Conduct, by telephone, a prepared, State approved, statewide Behavioral Risk Factor Surveillance Survey to determine the prevalence rates of lifestyles of adult Tennesseans, as required by federal grant number U58/CCU422782, the Chronic Disease Prevention & Health Promotion Programs Cooperative Agreement, which began on June 30, 2003, and continues through June 29, 2008. The data results will be collected electronically and stored electronically on the Department of Health's Network Server and periodically forwarded to Centers for Disease Control (CDC) throughout a survey year. Results of the data analysis by CDC will be returned to the state within six months of the completion of a survey year.
- b. Conduct, by telephone, a prepared, State approved, statewide Pregnancy Risk Assessment and Monitoring Survey to determine the prevalence rates of lifestyles of new birth mothers in Tennessean, as required by federal grant number UR6/DP000528, Pregnancy Risk Assessment and Monitoring System Cooperative Agreement, which began on April 15, 2006, and continues through April 14, 2011. The data results will be collected electronically utilizing the CDC supplied WinCATI automated interviewing software and stored electronically on the Department of Health's Network Server. The data collected will be periodically forwarded to Centers for Disease Control (CDC) throughout a survey year. Surveyors and supervisory staff will be trained by the State in the use of the WinCATI software, recording responses and comments, handling sensitive situations, human subjects training, call dispositions and interviewer monitoring.
 - i. Interviewers and supervisory staff will be trained initially by the State in the use of the WinCATI software, recording responses and comments, handling sensitive situations, human subjects training, call dispositions and interviewer monitoring. Subsequent training of personnel will be provided by the Contractor.
 - ii. Supervisory staff shall monitor interviewers at least 10% of the time that calls are being placed to determine whether the interviewer is appropriately consenting women, administering the interviews, protecting the mother's confidentiality, responses are recorded accurately and keeping data collection forms and their stations secure. A monthly monitoring report shall be submitted to the State.
- c. Conduct, by telephone, other prepared, State approved, health related surveys on an as needed basis, contingent on available Contractor staff resources.
- d. Provide up to 20 telephone interviewers who will be able to conduct the telephone survey during evenings on weekdays and during the morning and afternoon on weekends.
- e. Provide one administrative supervisor position, two supervisor positions and up to 20 telephone interviewer positions to conduct the survey. A brief job description of each position is given below.

Administrative Supervisor

The administrative supervisor will be responsible for scheduling interviewers and making sure the survey is conducted properly. The person will not be responsible for compilation, editing or archiving data results. At times, conducts interviews. Serves as primary trainer of new staff.

Supervisor

The survey supervisor is responsible for managing interviewing staff during individual survey sessions; assists administrative supervisor in scheduling and training; and at times conduct interviews.

Interviewers

Conduct individual interviews by telephone of randomly selected adults who are residents of the state. Should have skill in using a personal computer.

6. Add the following as Section A.2.e and renumber any subsequent sections as necessary:

A.2.e Provide telephone numbers and perform telephone number searches.

The other terms and conditions of this Contract not amended hereby shall remain in full force and effect.

IN WITNESS WHEREOF:

TENNESSEE OPPORTUNITY PROGRAMS, INC.:

Gaila Fletcher, Executive Director

DATE

PRINTED NAME AND TITLE OF CONTRACTOR SIGNATORY

TENNESSEE DEPARTMENT OF HEALTH

Kenneth S. Robinson, M.D., Commissioner

Date

APPROVED:

DEPARTMENT OF FINANCE AND ADMINISTRATION:

M. D. Goetz, Jr., Commissioner

Date

DEPARTMENT OF PERSONNEL:

Not Applicable

DEBORAH E. STORY, COMMISSIONER

Date



COMPTROLLER OF THE TREASURY:

John G. Morgan, Comptroller of the Treasury

Date

CONTRACT SUMMARY SHEET

8-8-05

RFS #				Contract #			
343.20-028-04				FA-04-15894-02			
State Agency				State Agency Division			
Department of Health				Policy, Planning & Assessment			
Contractor Name				Contractor ID # (FEIN or SSN)			
Tennessee Opportunity Programs, Inc.				C- or <input checked="" type="checkbox"/> V- 23-7292125-00			
Service Description							
For provision of a monthly statewide interviewing system of adult residents of Tennessee - Amendment #2							
Contract BEGIN Date		Contract END Date		Subrecipient or Vendor?		GFDA #	
4/1/2004		3/31/2007		Vendor		93.945	
Mark, if Statement is TRUE							
<input checked="" type="checkbox"/> Contractor is on STARS as required				<input checked="" type="checkbox"/> Contractor's Form W-9 is on file in Accounts as required			
Allotment Code	Cost Center	Object Code	Fund	Funding Grant Code	Funding Subgrant Code		
343.20	see attached	139	11	2T0			
FY	State	Federal	Interdepartmental	Other	TOTAL Contract Amount		
2004		\$ 19,284.18			\$ 19,284.18		
2005		\$ 110,767.82			\$ 110,767.82		
2006		\$ 118,215.00		\$ 15,050.00	\$ 133,265.00		
2007		\$ 80,000.00			\$ 80,000.00		
					\$ -		
					\$ -		
TOTAL	\$ -	\$ 328,267.00	\$ -	\$ 15,050.00	\$ 343,317.00		
— COMPLETE FOR AMENDMENTS ONLY —				State Agency Fiscal Contact & Telephone #			
FY	Base Contract & Prior Amendments	THIS Amendment ONLY	Crystal Allen, 741-9419				
2004	\$ 19,284.18		State Agency Budget Officer Approval 				
2005	\$ 110,767.82						
2006	\$ 92,665.00	\$ 40,600.00					
2007		\$ 80,000.00					
TOTAL	\$ 222,717.00	\$ 120,600.00	Funding Certification (certification required by T.C.A. § 9-4-5113, that there is a balance in the appropriation from which the obligated expenditure is required to be paid that is not otherwise encumbered to pay obligations previously incurred)				
End Date	3/31/2006	3/31/2007	<div style="float: right; text-align: right;"> RECEIVED 12 21 05 OFFICE OF THE COMPTROLLER </div>				
Contractor Ownership							
<input type="checkbox"/> African American	<input type="checkbox"/> Disabled	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Small Business	<input type="checkbox"/> NOT minority/disadvantaged			
<input type="checkbox"/> Asian	<input type="checkbox"/> Female	<input type="checkbox"/> Native American	<input checked="" type="checkbox"/> OTHER minority/disadvantaged	<input type="checkbox"/> Nonprofit Org.			
Contractor Selection Method							
<input checked="" type="checkbox"/> RFP	<input type="checkbox"/> Competitive Negotiation		<input type="checkbox"/> Alternative Procurement Method				
<input type="checkbox"/> Non-Competitive Negotiation	<input type="checkbox"/> Government		<input type="checkbox"/> Other				
Procurement Process Summary							
RFP 343.20-001, term extension year three. <div style="text-align: center;">  DEC 29 2005 DIRECTOR OF ACCOUNTS </div>							

CONTRACT SUMMARY SHEET

RFS Number:	343.20-028-04	FA-04-15894-01
State Agency:	Tennessee Department of Health	Division: Policy, Planning & Assessment
Contractor:	Contractor Identification Number:	
Tennessee Opportunity Programs, Inc.	X V- C-	23-7292125-00

Service Description

For provision of a monthly statewide interviewing system of adult residents of Tennessee - Amendment #1.

Contract Begin Date:	Contract End Date:
April 1, 2004	March 31, 2006

Allotment Code	Cost Center	Object Code	Fund	Grant	Grant Code	Subgrant Code
343.20	20 & 01 see attached	139	11	X on STARS		

FY	State Funds	Federal Funds	Interdepartmental Funds	Other Funding	Total Contract Amount Include ALL amendments
04		\$19,284.18			\$19,284.18
05		\$110,767.82			\$110,767.82
06		\$77,615.00		\$15,050.00	\$92,665.00
					\$0.00
					\$0.00
					\$0.00
Total:	\$0.00	\$207,667.00	\$0.00	\$15,050.00	\$222,717.00

CFDA Number:	93.945	Check the box (below) ONLY if the answer is YES:
State Fiscal Contact:		Is the Contractor a SUBRECIPIENT? (per OMB A-130)
Name: Wayne Pierson		Is the Contractor a VENDOR? (per OMB A-130)
Address: 10th Floor, Andrew Johnson Tower		Is the Fiscal Year Funding STRICTLY LIMITED?
Phone: 532-7148		Is the Contractor on STARS?
Procuring Agency Budget Officer Signature:		Is the Contractor's FORM W-9 ATTACHED?
		Is the Contractor's Form W-9 Filed with Accounts?

Wayne Pierson / dp

COMPLETE FOR ALL AMENDMENTS (only)		
End Date >	Base Contract & Prior Amendments	This Amendment ONLY
March 31, 2005		March 31, 2006
FY 04	\$19,284.18	
FY 05	\$84,767.82	\$26,000.00
FY 06		\$92,665.00
FY		
FY		
FY		
Totals:	\$104,052.00	\$118,665.00

Pursuant to T.C.A. Section 9-6-113, I, M.D. Goetz, M.D., Commissioner of Finance and Administration, do hereby certify that there is a balance in the appropriation from which this obligation is required to be paid that is not otherwise encumbered to pay obligations previously incurred.

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2005 MAR -4 PM 2:21
COMPTROLLER'S OFFICE
OFFICE OF
MANAGEMENT SERVICES

CONTRACT SUMMARY SHEET

Contract Number	RFS 343.20-028-04	Contract Identification Number	FA-04-15894-00
State Agency	Tennessee Department of Health	Division	Policy, Planning & Assessment
Contractor	Tennessee Opportunity Programs, Inc.		

X	V-
	C-

23-7292125-00

Service Description

provision of a monthly statewide interviewing system of adult residents of Tennessee.

Contract Begin Date	April 1, 2004	Contract End Date	March 31, 2005
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Allocation Code	Cost Center	Object Code	Fund	Grant	Grant Code	Subgrant Code
343.20	20	139	11	X on STARS		
RY	State Funds	Federal Funds	Interdepartmental Funds	Other Funding	Total Contract Amount Include All Amendments	
04		\$104,052.00			\$104,052.00	
					\$0.00	
					\$0.00	
					\$0.00	
					\$0.00	
					\$0.00	
					\$0.00	
Total	\$0.00	\$104,052.00	\$0.00	\$0.00	\$104,052.00	

Contract Number	93.945	Check the box (below) ONLY if the answer is YES
State Fiscal Contact	10th Floor, Andrew Johnson Tower	Is the Contractor a SUBRECIPIENT? (per OMB A-133)
741-1614		Is the Contractor a VENDOR? (per OMB A-133)
Procuring Agency Budget Officer Signature	George Womack/dp	Is the Fiscal Year Funding STRICTLY LIMITED?
		Is the Contractor on STARS?
		Is the Contractor's FORM W-9 ATTACHED?
		Is the Contractor's Form W-9 Filled with Accounts?

COMPLETE FOR ALL AMENDMENTS (only)		
End Date >	Base Contract & Prior Amendments	This Amendment ONLY
Totals	\$0.00	\$0.00

Pursuant to T.C.A., Section 9-6-113, I, M.D. Goetz, M.D., Commissioner of Finance and Administration, do hereby certify that there is a balance in the appropriation from which this obligation is required to be paid that is not otherwise encumbered to pay obligations previously incurred.

JUL 13 2004

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MAR 26 2004

Office of Contracts Review